PART B - FEE(S) TRANSMITTAL

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		lock 1 for any change of address)	Fee(s) Transmittal. Thi	s certificat	te cannot be used for	r domestic mailings of the or any other accompanying it or formal drawing, must
12400 WILSHIF SEVENTH FLO	KOLOFF TAYL RE BOULEVARD	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	MAR 0 9 2007 II her State addr	Cer reby certify that th es Postal Service w essed to the Mail smitted to the USP	tificate of is Fee(s) T with suffici- Stop ISS TO (571) 2	Mailing or Transn	nission deposited with the United t class mail in an envelope above, or being facsimile te indicated below.
3/09/2007 BABRAHA2	00000026 10032729		<u> </u>	ane Dobkin	s m/		(Depositor's name)
		00 OP		Jane 1 - 2007			(Date)
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNI	EY DOCKET NO.	CONFIRMATION NO.
10/032,729 TITLE OF INVENTION	12/28/2001 : METHOD AND APPA	ARATUS FOR REPLICA	Edmund G. Chen ATING PACKET DATA W	ITHIN A NETWO		906.P098 IENT	6390
APPLN. TYPE	SMALL ENTITY	ISSUÉ FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE T	OTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0		\$1400	05/07/2007
EXAM	INER	ART UNIT	CLASS-SUBCLASS				
SEFCHECK, (GREGORY B	2616	370-428000	•			
CFR 1.363). Change of corresponded ress form PTO/SE "Fee Address" indi	ication (or "Fee Address	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to					
PTO/SB/47; Rev 03-0 Number is required.	2 or more recent) attach	2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
			THE PATENT (print or typ	•	-		
PLEASE NOTE: Unl recordation as set fort	ess an assignee is ident h in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NC	data will appear on the pa or a substitute for filing an a	atent. If an assigne assignment.	ee is ident	ified below, the do	cument has been filed for
(A) NAME OF ASSIG			(B) RESIDENCE: (CITY	_	OUNTRY)	
Redback Ne	tworks Inc.		San Jose,	CA 95134	USA		
lease check the appropri	iate assignee category or	categories (will not be p	rinted on the patent):	Individual 🖾 Co	rporation o	or other private grou	up entity Government
a. The following fee(s): Issue Fee Publication Fee (N Advance Order - #	o small entity discount p		b. Payment of Fee(s): (Plea A check is enclosed. Payment by credit care The Director is hereby	d. Form PTO-2038	is attache	d.	
			The Director is hereby overpayment, to Depos	sit Account Numbe	r <u>02–26</u>	666 (enclose an	extra copy of this form).
	tus (from status indicate s SMALL ENTITY state		☐ b. Applicant is no long	ger claiming SMAI	LL ENTIT	Y status. See 37 CF	R 1.27(g)(2).
OTE: The Issue Fee and terest as shown by the r	d Publication Fee (if req	uired) will not be accepted	ed from anyone other than the Office.				
Authorized Signature				Date 3/6	1		
Typed or printed name	Daniel M. De	eVos		Registration N	-	313	
his collection of inform	ation is required by 37 C	FR 1.311. The informati	on is required to obtain or re	etain a benefit by the	he public w	which is to file (and	by the USPTO to process)

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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GTRADE	FT	SVVIC	רותו	ΤΔΙ	Complete if Known						
, _	- for	EV		IAL	Application Number		32,729				
FEE TRANSMITTAL for FY 2006					Filing Date First Named Inven		ember 28, 2001				
Patent fees are subject to annual revision.					Examiner Name	Dulli	und G. Chen				
Applicant claims small entity status. See 37 CFR 1.27.					Art Unit	2616	Shew				
TOTAL AMOUNT OF PAYMENT (\$) 1,400.00				Attorney Docket N							
METHOD	OF PAY	MENT (cl	neck all	that apply)							
☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):											
Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee											
★ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.											
und	er 37 CFF	< §§ 1.16,	1.17, 1.	18 and 1.20.							
FEE CALCUI	LATION										
Large En	tity	Small	Entity								
Fee	Fee	Fee	Fee	Fee Description	an.			Foo Boid			
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1051	130	2051	65	Surcharge - late filing fee or oath							
1052	50	2052		Surcharge - late provisional filing fee or cover sheet.							
2053	130	2053	130	Non-English specification							
1251	120	2251		Extension for reply within first month							
1252	450	2252		Extension for reply within second month							
1253	1,020	2253		· ·							
1254	1,590	2254		Extension for reply within third month							
				Extension for reply within fourth month							
1255	2,160	2255		Extension for reply within fifth month							
1401	500	2401	250	Notice of Appeal							
1402	500	2402	250	Filing a brief in support of an appeal							
1403	1,000	2403		Request for oral hearing							
1451	1,510	2451		Petition to institute a public use proceeding							
1460	130	2460		Petitions to the Commissioner							
1807	50	1807		Processing fee under 37 CFR 1.17(q)							
1806	180	1806	180	· · · · · · · · · · · · · · · · · · ·							
1809	790	1809									
			395	9							
1810 790 2810 395 For each additional invention to be examined (37 CFR § 1.129(b))											
Other fee (specify) Issue Fee 1,400.00											
SUBTOTAL (2) (\$) 1,400.00											
SUBMITTE	D BY				Desired to the		Comp	lete (if applicable)			
Name (Print/Typ	Dan	ielM. De	Vos		Registration No. (Attorney/Agent)	37,813	Telephone	(408) 720-8300			
Signature							Date	2/6/2			